POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*lung*		10/24/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	WN	67479	12/4/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim (Final / Original)	Date							Claim (Final / Original)	Date							Claim (Final / Original)	Date						
1	✔	✔						51								101							
2	✔	✔						52								102							
3	✔	✔						53								103							
4	✔	✔						54								104							
5	✔	✔	=	=				55								105							
6	✔	✔	=	=				56								106							
7	✔	✔	=	=				57								107							
8	✔	✔	=	=				58								108							
9	✔	✔	=	=				59								109							
10	✔	✔	=	=				60								110							
11	✔	✔	✔	✔				61								111							
12	✔	✔	✔	✔				62								112							
13	✔	✔	=	=				63								113							
14		✔						64								114							
15		✔						65								115							
16			=					66								116							
17			=					67								117							
18			=					68								118							
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47								97								147							
48								98								148							
49								99								149							
50								100								150							

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)